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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-675)							SERIAL NO. <u>09/782917</u>	FILED DATE <u>2/13/01</u>
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1							51	
2							52	
3							53	
4							54	
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44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	6		6		6		TOTAL IND.	
TOTAL DEP.	19		19		19		TOTAL DEP.	
TOTAL CLAIMS	25		25		25		TOTAL CLAIMS	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

FORM PTO-1360 (REV. 9-78)

U.S. DEPARTMENT OF COMMERCE
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